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Caring for a parent who lives far away: The consequences

by Mireille Vézina and Martin Turcotte

Family members are generally the main source of informal assistance when a relative has a chronic health problem. When those requiring care are elderly, if they have children who are available it is usually these children who come to their aid.[1] Seniors who require support but do not have a partner or whose partner can no longer provide care are potentially even more dependent on their children.

As the population ages, it is likely that an increasing number of adults will be called upon to assist and support a parent with diminishing independence or a chronic health problem. This trend appears to have already begun. For example, in 2007, the number of people aged 45 and over providing assistance and care to a chronically ill senior was 2.7 million, up 670,000 from five years earlier (in 2002). The increase was especially substantial for women, with the proportion of women aged 45 and over who informally provided care rising from 18% in 2002 to 22% in 2007. For men, the proportion remained unchanged (19%). In most cases (62%), the receiver of care was a parent or parent-in-law.[2]

Assisting one's ailing parents or parents-in-law is a self-evident responsibility for many people. However, different constraints on time and resources may make this an onerous responsibility. The majority of caregivers are employed—often full-time.[3] Also, even though their own children may be teenagers or young adults and therefore require less attention, it is increasingly common, as fertility extends to more advanced ages, for caregivers in their forties to still be responsible for young children.[4]

These occupational and family commitments can put pressure on caregivers. A Statistics Canada study has shown, for example, that some workers who provided care—especially high-intensity care—felt stressed and less satisfied with how they were balancing their work life and their home life. Those who provided such care while working long hours may have significant feelings of guilt.[5]

In addition to the constraints related to having a job and working long hours, many caregivers live some distance from the parent to whom they are providing care. It is possible that, for them, the costs of assisting an ailing parent, in both time and money, are even greater. But is this really the case, and if so, to what extent?

Little attention has been given to the question of how long-distance caregiving affects the caregiver's social and economic life. In a context where individuals and families are increasingly geographically dispersed, a number of questions are of interest. What proportion of caregivers live an hour or more by car from the parent to whom they are providing care? What socioeconomic differences are there between caregivers who live farther from their parent and those who live closer? Do the types of support provided vary based on the distance between the caregiver and the assisted parent? And finally, does living further away have negative effects on caregivers in financial, occupational, social and family terms? The main objective of this study is to answer these questions.

The first section of this study provides a statistical profile of caregivers who live far from their parents and compares them with caregivers who live close by. The second section looks at the different financial, social and work schedule impacts that are associated with living relatively far from the care recipient.

This study focuses on individuals aged 45 and over whose parent or parent-in-law is the primary receiver of care, that is, the person to whom they have devoted the most time and resources in the past twelve months because of a long-term health problem or physical limitation. The term 'care receiver' or 'care recipient' will be used to designate these persons. Data for the study are drawn from the 2007 General Social Survey (GSS) on the family, social support and retirement. (For more information, see the text box entitled *"What you should know about this study."*)

What you should know about this study

Data source

The analyses contained in this article are based on data from the General Social Survey (GSS) conducted by Statistics Canada in 2007 on the family, social support and retirement. This survey covers some 23,000 Canadians aged 45 and over, and living in private residences in the ten provinces.

Study population

The population that is the focus of this study consists of persons who have provided assistance to a parent or parent-in-law and who is the primary care receiver. The primary care receiver is defined as the person to whom the respondent devoted the most time and resources during the last twelve months as a result of a chronic health problem or physical limitation. The assistance provided may have been given either throughout the entire year preceding the survey or during a shorter period of time during the preceding year. It is not possible to determine how the care was distributed over the course of the year.

This population corresponds to a sample of 2,700 persons, representing 1.65 million Canadians.

In the 2007 GSS, caregivers were asked where the primary care receiver was living when the unpaid help was provided. Four distance categories corresponding to the travel time between the caregiver's home and that of the care receiver were created (survey participants did not have to provide information on the distance in kilometres): 1) same neighbourhood (30 minutes or less by foot or bus); 2) surrounding neighbourhood or community (less than an hour by car); 3) between one hour and less than a half day's journey by car; and 4) more than a half day's journey by car.

The first section of the article presents general information on the proportion of caregivers living relatively close to their parent's home. In particular, it provides information on the respondents who lived in the same household or building as their primary care receiver. However, in the subsequent sections, these respondents are excluded from the analysis. This group of caregivers living in the same household as their parent has specific characteristics and is dealt with in a supplementary text box entitled *Living in the same household or building as the cared-for parent*.

It should be noted that the analysis provides representative information on caregivers whose primary care-receiver is one of their parents. Thus, it does not cover all caregivers.

Terminology

In this article, persons who assist their parent(s) or provide him or her with care are called 'caregivers.' Parents receiving care are referred to as 'care receivers' or 'care recipients.'

Statistical models

The distance between the place of residence of the caregiver and that of the assisted parent is not the only factor that may explain why some caregivers experience economic and social consequences. To check the robustness of our results with respect to geographic distance, we created logistic regression models. In these models, the dependent variables have two possible values: yes or no. We present the results for two dependent variables: having incurred expenses because of the care provided to the receiver, and missing work. Models were also created for the following three dependent variables: having had to cancel holiday plans because of the care provided to the receiver; having reduced one's social activities; and having reduced one's family time.

The results from these models are analysed using odds ratios. These are employed to evaluate the extent to which the distance from the caregiver's place of residence is associated with experiencing a given consequence when the other factors are held constant (in other words, when neutralizing the effect of the other variables assumed to be associated with the risk of experiencing that consequence).

The factors considered in the model include the number of hours and support activities that caregivers provided to receivers. Variables indirectly associated with the care receiver's health status are also included, such as type of dwelling occupied by the care receiver (private household, supervised dwelling, institution), number of hours of care received from public- or private-sector employees, physical or mental health problems, and whether the main receiver died during the last twelve months; whether or not the caregiver had to move in with the receiver for the duration of the assistance. Lastly, caregiver characteristics are considered: sex, education level, number of brothers and sisters still living, employment status and flexibility of working conditions, and presence of children in the home. Taking these factors into account ensures that a possible association between geographic distance and the consequences is attributable to the distance.

Just over one caregiver in five lives more than an hour away from the assisted parent

In 2007, an estimated 359,700 persons provided help to a parent despite living more than an hour away. These caregivers accounted for one-fifth (22%) of the study population. Even so, a large number of caregivers lived nearby. Almost half (46%) of caregivers lived in the same neighbourhood as their parent, that is, they lived less than 30 minutes away by foot or bus. Another 13% lived in the same household (Table 1).

British Columbia had the largest proportion of caregivers living far from their parent. In that province, nearly one-third (30%) lived more than an hour away from their primary receiver, twice the proportion as in the Atlantic provinces, where they accounted for 14% of caregivers (Table 1).

One of the reasons that may explain this large proportion is that caregivers who live in British Columbia are more likely than those in other provinces to have been born outside the province, either elsewhere in Canada or in another country. Of caregivers living in British Columbia, more than half (52%) were not born in that province. The corresponding proportions were 33% in Ontario, 17% in the Atlantic provinces and 10% in Quebec. It would appear that caregivers who live in the province where they were born are more likely to live near the parent to whom they are providing care (who probably also lives in that province).

Caregivers living further from the care receiver tend to be more educated and concentrated in the largest metropolitan areas

Persons with higher education levels are known to also be more likely to have left their place of origin and, if they have done so, to have migrated to large cities.[6]

Caregivers who lived far from the parent to whom they were providing care were both more educated and more likely to live in a large urban area.

Indeed, 61% of persons living more than a half day's journey from the care receiver had a university diploma, compared to 28% of persons living in the same neighbourhood. Also, among caregivers living far from the assisted parent, more than half (58%) lived in one of Canada's six largest metropolitan areas, namely those with a population of 1 million or more—Toronto, Montreal, Vancouver, Ottawa-Gatineau, Calgary or Edmonton. Among caregivers who lived in the same neighbourhood as the care recipient, the corresponding proportion was 35%.

Since caregivers living a greater distance from their care receivers are, on average, more educated and more concentrated in urban areas than those living closer to their care receivers, it is not surprising to find that they also have higher incomes. Among caregivers living furthest away, nearly two-thirds (64%) had a household income of $80,000 or more. The corresponding proportion was 49% for caregivers living in the same neighbourhood as their primary receiver of care (Table 2).

Regardless of the distance just over 7 in 10 caregivers had employment income

For some people, having a job can be a major constraint on providing care. The results show that regardless of the place of

Table 1 Gender and region of residence of caregivers by proximity to care receiver

	Same household †	Same neighbourhood	Surrounding neighbourhood or community (less than one hour by car)	Between one hour and less than half day's journey by car	More than a half day's journey by car
			percentage		
Total	**13**	**46**	**20**	**15**	**7**
Men	13	48	18	15	7
Women	13	44	21	15	6
Region of residence					
Atlantic region	15	50	21*	10*	4
Quebec	11	50	21	16	3*
Ontario	13	44	20	16	7
Prairie region	12	48	19	13	8
British Columbia	14	38	19	16	13*

† reference group

* statistically significant difference from reference group at $p < 0.05$

Source: Statistics Canada, General Social Survey, 2007.

residence, most caregivers had a job (approximately 70%). The proportion of caregivers who retired did not exhibit statistically significant variations according to geographic distance. However, caregivers living in the same neighbourhood as the assisted parent were more likely than those living more than a half day's journey away not to have a paying job (Table 2). This result is consistent with the finding that persons who help a parent living far away are more likely to have higher incomes.

Caregivers who lived more than a half day's journey away from their primary care receiver were also less likely to have children in the home (38%) than were caregivers who lived closer to their receiver (49%). That said, these children are mostly young adults or teenagers, which likely reduces the caregivers' family responsibilities.

The further away caregivers live, the less likely they are to have come from a large family

The number of siblings in a family can affect the distribution of tasks and the sharing of responsibilities when a parent requires care. All things being equal, it is likely that in the largest families, the burden on each adult child will be less than in smaller families.

The further away caregivers live from care receivers, the less likely they are to come from a large family (four or more brothers and sisters) (Table 2). Indeed, one-third of caregivers who lived more than a half day's journey away from the care recipient parent reported having at most one brother or sister still living (33%); in each of the other distance categories, the corresponding proportion was approximately 10 percentage points lower.

It is possible that some people living more than a half day's journey away from their ailing parent are those who provide care because they are the only ones who are able to do so in their family. Since baby boomers tend to have smaller families than their parents, geographic distance may become a more important barrier in the coming years, when baby boomers grow old and require care themselves.

Caregivers who live further away are more likely to share the responsibilities for care with a professional caregiver (from the public or private sector). Indeed, for 28% of caregivers who lived more than a half day's journey away, the care receiving parent was receiving at least five hours of professional care per week. The corresponding proportion was 12% for persons living in the same neighbourhood as the parent to whom they were providing care (Table 2). This result is consistent with the finding that caregivers living further away from the parent to whom they are providing care tend to come from smaller families and may more often have to draw on more formal sources of assistance.

Despite living far away, caregivers often provide the same types of assistance, and sometimes in larger proportions

Some types of support are more easily provided when the caregiver lives close to the person assisted, such as transportation, shopping, banking or bill paying. And indeed, the proportion of caregivers living in the same neighbourhood as their primary care receiver and engaging in these types of activities was higher (86%) than the corresponding proportion of caregivers living more than a half day's journey away (79%).

Even so, caregivers who live further from their parent perform a great variety of tasks. There were few differences between them and those caregivers living close to the care receiver in the likelihood of assisting with home maintenance and outside work, medical treatment and co-ordination of caregiving tasks. However, caregivers living more than a half day's journey from their parent were more likely than others to have provided domestic assistance, such as meal preparation, meal clean-up and housekeeping, and a greater proportion of them provided personal care (Table 2).

One possible explanation for these findings is that because of the sizeable distance to be travelled, some caregivers may have temporarily stayed with their parent when providing care. Staying in the parent's home (because going back to one's own home on the same day is not realistic), and therefore sharing a number of meals, may be conducive to performing numerous domestic tasks that would not necessarily be performed if only spending a short period of time with the care receiver. Additionally, those staying the night or longer may be prompted to provide additional assistance with various aspects of personal care. That said, the frequency of providing this intensive type of care is lower than for caregivers who reside nearby.

Data from the GSS show that the greater the distance between the caregiver and the receiver, the less frequent the caregiving visits occurred. For example, 85% of persons who lived more than a half day's journey away reported having seen the person they were assisting once a month or less. Conversely, 93% of caregivers living in the same neighbourhood as the assisted parent saw him or her at least once a week or more (Table 2). A recent American study on long-distance caregiving supports this finding.[7] According to that study, even though the types of care generally varied little among caregivers living close or far away, the frequency of care varied considerably.

Living far from the care receiver increases the risk of having extra expenses

The first part of this article profiled caregivers according to whether or not they lived near the care receiving parent. This second part focuses on the possible consequences related to living a considerable distance from the assisted parent. In the GSS, caregivers were asked whether assisting someone had caused them

Table 2 Caregiver characteristics by distance from care receiver

	Same neighbourhood †	Surrounding neighbourhood or community (less than one hour by car)	Between one hour and less than half day's journey by car	More than a half day's journey by car
	percentage			
Education level				
University	28	30	38*	61*
Other postsecondary	38	42	43	28*
High school diploma or less	34	28*	18*	11E*
Area of residence				
Greater census metropolitan areas (CMA)	35	46*	52*	58*
Other census metropolitan areas	25	23	19*	14E*
Census agglomerations	18	13*	13*	10E*
Outside of census metropolitan areas and census agglomerations	22	18	17*	17E
Employment status				
Paid employment or self-employed	73	70	73	76
Retired	16	18	16	19E
Without paid employment	11	12	11	6E*
Household revenue				
Less than $40,000	17	15	14	7E*
$40,000 to $79,999	34	37	30	28
$80,000 or more	49	48	56	64*
Presence of children in the home				
None	51	54	50	62*
One child or more	49	46	50	38*
Number of siblings still living				
None or one	23	23	24	33*
Two or three	41	44	46	45
Four or more	36	33	30*	22*
Type of help given to the parent				
Transportation, shopping, banking or paying bills	86	83	78*	79*
Meals, dishwashing, house cleaning, laundry and sewing	46	44	49	60*
Housekeeping or outdoor chores	46	41	50	48
Help with personal care	28	27	33	38*
Help with treatment and medical care	21	17	21	26
Assist with co-ordination of health care needs	44	46	42	49
Living with the care receiver	2E	3E	3E	8E*
Number of hours allocated per week to caregiving				
Four or fewer hours	57	61	61*	58
5 to 9 hours	20	19	18	13E*
10 to 14 hours	10	10	8E	9E*
15 hours or more	12	11	11E	21*
Frequency of caregiving				
Everyday	23	7*	4E*	8E*
At least once a week	70	72	40*	7E*
Once a month or less	7	20*	56*	85*
Professional help with caregiving (government or paid employee)				
No help	73	71	65*	52*
Fewer than 5 hours per week	15	16	17	20E
More than 5 hours per week	12	13	18*	28*

† reference group

* statistically significant difference from reference group at $p < 0.05$

Source: Statistics Canada, General Social Survey, 2007.

to have extra expenses; to miss full days of work; to cancel holiday plans; to reduce the number of their social activities; or to spend less time than they would have liked with their children or spouse.

Living further from the receiver substantially increased the probability of incurring extra expenses. Six in ten caregivers (62%) who lived more than a half day's journey away from their primary receiver had incurred extra expenses as a result of the assistance they provided. This was twice the proportion of those living in the same neighbourhood as their primary receiver (Chart 1).

Apart from distance there were a number of other factors that were associated with a higher probability of having extra expenses (e.g., education level and number of hours of care provided). However, even when these factors were held constant (Table A.1), the odds of having extra expenses were 3.0 times higher for caregivers living more than a half day's journey away than for those living in the same neighbourhood. This finding is consistent with the fact that the greater the distance to be traveled, the higher the related costs are likely to be. For those who must travel by air in order to provide care, this reality is clear.

Moreover, when providers of informal care had to incur extra expenses, the expenses were, on average, higher for those who lived far away than for those living closer. Indeed, 39% of those living more than a half day's journey away from the parent being assisted reported that they had spent, on average, more than $500 per month on care. Only 11% of those living in the same neighbourhood reported spending an average of $500 per month.

Despite these sizeable extra expenses, caregivers who had to travel great distances were no more likely than other caregivers to have had access to money from government programs (5%). Also, there was no difference in the likelihood of having access to tax benefits (credits or refunds) for care-related expenses between caregivers living close or caregivers farther away. Only about 2% caregivers had access to such benefits.

Although caregivers living some distance away from the care receiver were more likely to have spent extra amounts on caregiving, they were also more likely to be in a higher income bracket (Table 2) than those living close to the care recipient.

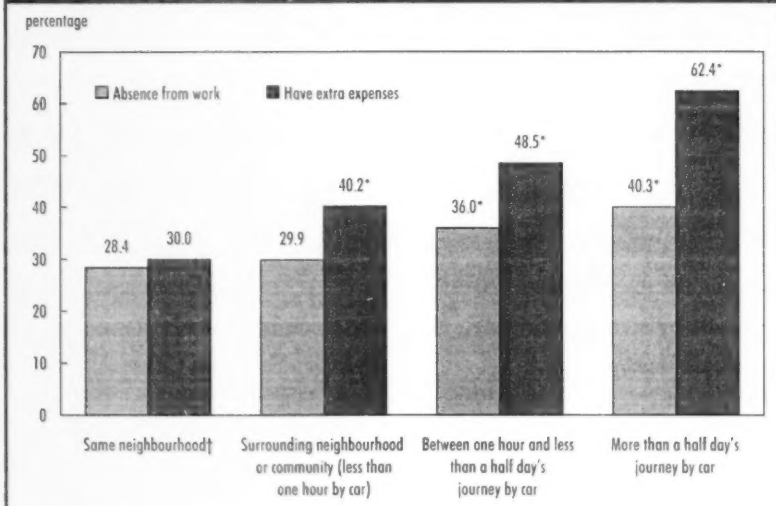
Providers of informal care who lived further from the care receiver were more likely to miss work

It is possible that the expenses incurred by caregivers living a greater travelling distance away are more difficult to take on when they must take time off work because of the care they provide. This appears to be the case for many: 40% of providers of informal care who lived more than a half day's journey away from their chronically ill parent reported missing full days of work in order to provide the parent with care, compared to 36% of those living between an hour and less than a half day's journey away and 28% of those living in the same neighbourhood (Table A.1).

However, when the other factors associated with the possibility of missing work were considered, persons living more than an hour away and those living more than a half day's journey away were no more likely than those living in the same neighbourhood to have missed work (Table A.2).

This is likely due to the fact that other factors in the model had a substantial impact on the probability of missing work. Two of these factors proved to be associated with a higher risk of missing work: having had to stay with the care receiver because of the types of care provided (2.3 times higher risk of missing work) and having provided a large number of hours of care to the care recipient (for those who had provided 15 hours or more of care, the risk of missing work was 3.3 times higher than for

Chart 1 The farther away a caregiver lives from the care receiver, the more likely they are to have extra expenses or be absent from work



† reference group

* statistically significant difference from reference group at $p < 0.05$

Source: Statistics Canada, General Social Survey, 2007.

those providing less than five hours of care) (Table A.2).

Caregivers who lived more than a half day's journey from the parent they were assisting stood out on both these critical factors. First, they were more likely than those living closer to have stayed with their parent in order to provide assistance (8%, compared to 2% for those living nearby). Second, persons living further away were more likely to have provided 15 or more hours of care per week, possibly because of the intensity of the assistance provided during their stays (Table 2).

According to the results of a supplementary analysis (Table A.2, Model 2),[8] living far away from the assisted parent appears to be positively associated with missing days of work as a result of providing care. However, this relationship is indirect and disappears once some caregiving intensity measures (hours of care and staying or moving in to provide care) have been taken into consideration.

Caregivers who lived further from the receiver were no more likely to have to cancel holiday plans

Apart from financial consequences and time away from work, we looked at the negative effect of distance on other aspects of the caregiver's life: cancelling holiday plans, reducing social activities, and spending less time than desired with their children or spouse.

The geographic location of the caregiver in relation to the care receiver was not related to these types of consequences. Instead, other factors associated with intensity of care, such as the number of hours and the number of types of care provided, had a negative effect (Table A.1).

Among caregivers who lived further away from the receiver, women were more likely than men to take time off work

A supplementary statistical analysis was conducted to determine whether the different factors associated with an increased probability of having extra expenses and missing work were different for caregivers living further away from the assisted parent than for those living in the same neighbourhood as the parent or in the surrounding area (detailed results not shown). With respect to financial resources, these factors were nearly the same regardless of distance. In fact, for both groups, the two factors that most affected the likelihood of having extra expenses were the number of types of care provided and the number of hours devoted to care.

The factors that were related to increasing the probability of missing work were very similar between caregivers living nearby and those living further from the care receiver. For both groups, engaging in more types of support activities and providing care to a greater overall number of people were associated with a greater probability of missing work.

Living in the same household or building as the cared-for parent

In some cases, it may be easier for caregivers to live in the same dwelling or the same building as the care receiver. One of the characteristics of caregivers living in the same dwelling or the same building as the parent to whom they provide informal care is the small size of their family, that is, the number of siblings still living. Among caregivers who lived in the same dwelling or building as the care receiver, 41% said they had at most one brother or sister still living. Among other caregivers, the proportion was 24%.

Nearly 1 in 5 caregivers (18%) who lived with the care receiver did not have a job; this was higher than for other caregivers (10%). This characteristic is consistent with the time these caregivers devoted to care. Living in the same dwelling or building as the assisted person makes it possible to devote much more time and provide more types of care. In fact, more than half (57%) of caregivers living in the same household had devoted more than 10 hours per week to the parent to whom they were providing care. Furthermore, the number of hours of care per week is estimated at 29 for these caregivers, which is almost three times the number for caregivers living outside the receiver's dwelling or building. The latter devoted an average of 8 hours per week to care.

These results were also reflected in the number and type of support activities provided: 38% of caregivers who lived with the care receiver provided five to six types of support activities, which is twice as high as for other caregivers (17%).

In addition to the information about those who provided care, the 2007 General Social Survey contains information on persons who receive care because of a chronic health problem. It is possible to determine the health status of persons whose primary caregiver was their child. Those who lived with their caregiver were proportionally less likely to be in good health. More specifically, 44% of care receivers who lived with their primary caregiver described their state of health as fair or poor. The corresponding proportion was 33% for care receivers whose caregiver lived an hour or more away from their place of residence (by car).

Table A.1 Percent of caregivers who experienced social and economic consequences, by select characteristics

	Type of consequences				
	Extra expenses	Absence from work	Cancel holiday plans	Reduction of social activities	Reduction of family time
	percentage				
Caregiving factors					
Distance from care receiver					
Same neighbourhood (30 minutes by foot or bus)†	30	28	23	40	24
Surrounding neighbourhood or community (less than one hour by car)	40*	30	25	41	23
Between one hour and less than a half day's journey by car	49*	36*	23	43	30
More than a half day's journey by car	62*	40*	27	40	24E
Moved in with the care receiving parent					
Yes	73*	74*	59*	77*	73*
No†	37	30	23	40	24
Number of hours allocated per week to caregiving					
Four or fewer hours†	31	23	13	29	17
5 to 9 hours	41*	35*	33*	49*	28*
10 to 14 hours	48*	42*	38*	60*	51*
15 or more hours	60*	62*	50*	70*	54*
Number of caregiving activities performed					
One to two†	26	19	12	24	13
Three to four	41*	34*	26*	48*	28*
Five to six	61*	57*	50*	67*	53*
Total number of care recipients					
One†	35	29	21	37	20
Two	40*	32	26*	43*	29*
Three or more	51*	40*	35*	55*	36*
Type of problem of the parent receiving care					
Physical or mental†	35	29	22	36	22
Physical and mental	50*	37*	31*	56*	37*
Other	21E*	23E	F	21E*	F
Death of care receiver					
Deceased	48*	41*	44*	56*	39*
Not deceased†	37	30	22	39	24
Professional help with caregiving (government or paid employee)					
No help†	35	28	22	38	24
Fewer than 5 hours per week	40	34	27	43	24
More than 5 hours per week	49*	40*	31*	54*	34*
Type of dwelling occupied by parent					
Private household†	36	30	23	40	25
Supervised dwelling	50*	36	23	44	24
Institution	38	32	25	40	24
Caregiver characteristics					
Gender					
Men†	36	26	19	35	18
Women	40	36*	27*	45*	31*
Education level					
University	46*	33*	27*	45*	28*
Other postsecondary	38*	32	23	41*	26*
High school diploma or less†	29	27	21	34	19
Employment status and flexibility of work arrangements					
Paid employment with low flexibility†	38	29	23	44	29
Paid employment with high flexibility	36	31	23	42	26
Self-employed	42	34	21	35*	24
Retired	40	...	27	40	14E*
Without paid employment	34	...	25	36*	29

Table A.1 Percent of caregivers who experienced social and economic consequences, by select characteristics (continued)

	Type of consequences				
	Extra expenses	Absence from work	Cancel holiday plans	Reduction of social activities	Reduction of family time
	percentage				
Presence of children in the home					
None†	39	33	26	41	18
One or more	37	30	21*	41	30*
Number of siblings still living					
One or none†	40	36	26	40	22
2 or 3	39	30	24	43	30*
4 or more	35	29*	21	38	21

† reference group
* statistically significant difference from reference group at $p < 0.05$
Source: Statistics Canada, General Social Survey, 2007.

Table A.2 Odds ratio of having extra expenses or being absent from work for caregivers

	Extra expenses	Absence from work, model 1	Absence from work, model 2
	odds ratio		
Caregiving factors			
Distance from care receiver			
Same neighbourhood (30 minutes by foot or bus)†	1.00	1.00	1.00
Surrounding neighbourhood or community (less than one hour by car)	1.73*	1.11	1.15
Between one hour and less than a half day's journey by car	2.27*	1.46	1.52*
More than a half day's journey by car	3.02*	1.14	1.68*
Moved in with care receiving parent			
Yes	2.07*	2.29*	...
No†	1.00	1.00	...
Number of hours allocated per week to caregiving			
Four or fewer hours†	1.00	1.00	...
5 to 9 hours	1.59*	1.47*	...
10 to 14 hours	1.61*	1.44	...
15 or more hours	2.31*	3.35*	...
Number of caregiving activities performed	1.33*	1.42*	1.54*
Total number of care receivers			
One†	1.00	1.00	1.00
Two	1.29	1.57*	1.36*
Three or more	1.90*	1.87*	1.54
Type of problem of the parent receiving care			
Physical or mental†	1.00	1.00	1.00
Physical and mental	1.60*	1.25	1.15
Other	0.69	1.32	1.11
Death of care receiver			
Deceased	0.96	0.98	1.22
Not deceased†	1.00	1.00	1.00

Table A.2 Odds ratio of having extra expenses or being absent from work for caregivers (continued)

	Extra expenses	Absence from work, model 1	Absence from work, model 2
		odds ratio	
Professional help with caregiving (government or paid employee)			
No help†	1.00	1.00	1.00
Fewer than 5 hours per week	1.11	1.23	1.16
More than 5 hours per week	1.24	1.37	1.38
Type of dwelling occupied by parent			
Private household†	1.00	1.00	1.00
Supervised dwelling	1.73*	1.37	1.35
Institution	1.14	1.42	1.29
Caregiver characteristics			
Gender			
Men†	1.00	1.00	1.00
Women	0.96	1.42*	1.40*
Education level			
University	1.71*	1.15	1.03
Other postsecondary	1.28	1.06	1.12
High school diploma or less†	1.00	1.00	1.00
Employment status and flexibility of work arrangements			
Paid employment with low flexibility†	1.00	1.00	1.00
Paid employment with high flexibility	0.76	0.82	0.85
Self-employed	1.03	1.25	1.27
Retired	0.85	...	...
Without paid employment	0.80	...	...
Presence of children in the home			
None†	1.00	1.00	1.00
One or more	1.03	0.94	0.87
Number of siblings still living			
One or none†	1.00	1.00	1.00
2 or 3	1.02	0.73	0.69*
4 or more	0.97	0.82	0.78

† reference group
* statistically significant difference from reference group at $p < 0.05$
Source: Statistics Canada, General Social Survey, 2007.

However, there were differences between men and women caregivers with respect to geographical distance from the care receiver. Among those living more than an hour's journey away (including those living more than a half day's journey away), 46% of women missed days of work to provide care, compared to 27% of men. Among those living less than an hour away, the corresponding proportions were 32% for women and 26% for men. Women were generally more likely to provide care than men. It appears that when women live further from their parents, they are more inclined than men to miss days of work to look after their parents (either because it is possible for them to do so or because they are more inclined than men to take on the possible consequences of this absence from their work).

Summary

Many people provide assistance to their parents even though they live relatively far away. In fact, one fifth of the population aged 45 and over whom provided care to a parent lived more than an hour away.

The profile of these caregivers was different from that of caregivers who lived closer to the care receiving parent. Those who lived farther away were generally more educated, had higher incomes, had on average fewer brothers and sisters, and tended to live in the largest metropolitan areas.

Distance appears to be one of the most influential factors for caregivers related to the risk of experiencing financial consequences. People who lived further away were found to be much more likely to have extra expenses. When they did, they spent larger amounts. Also, although factors

other than geographic distance (e.g., intensity of care provided) were better predictors of the risk of missing work. caregivers living further from the assisted parent were found to be more likely to miss full days of work. However, the geographic constraint was not associated with the negative impacts of caregiving on the caregiver's social or family life.

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1. Cranswick, K., and Dosman, K. (2008). Eldercare: What we know today. *Canadian Social Trends*, 86, Statistics Canada, Catalogue no. 11-008.
2. Cranswick and Dosman (2008).
3. Pyper, W. (2006). Balancing career and care. *Perspectives on Labour and Income*, 11, Statistics Canada, Catalogue no. 75-001.
4. Vézina, M. and M. Turcotte. (2009). Forty-year-old mothers of pre-school children: A profile. *Canadian Social Trends*, 88, Statistics Canada, Catalogue no. 11-008. Williams, C. (2004). The sandwich generation. *Perspectives on Labour and Income*, 5, Statistics Canada, Catalogue no. 75-001.
5. Pyper, W. (2006).
6. Dion, P., and Coulombe, S. (2008). Portrait of the mobility of Canadians in 2006: Trajectories and characteristics of migrants, Statistics Canada, Report on the Demographic Situation in Canada: 2005 and 2006, p. 83-114.
7. Metlife Mature Market Institute. (2004). *Miles away: the Metlife study of long-distance caregiving – Findings from a national study by the national alliance for caregiving with Zogby international July 2004*.
8. In this supplementary logistic regression analysis, all factors in the first model are included except having stayed with the care receiver and the number of hours of care. When these two variables are not included in the regression, a statistically significant relationship is observed between greater distance and a greater risk of missing work as a result of providing care to the receiver (this is the same finding as presented in Table A.1, where the results are shown in percentage form).